# **MDSS**

## Monitoring And Decision Support Services

### A STUDY OF THE PAYMENT STATUS OF ADULT CLIENTS AT RHODE ISLAND COMMUNITY MENTAL HEALTH CENTERS, 1999–2003

#### INTRODUCTION

The Rhode Island Division of Behavioral Healthcare conducts periodic studies examining the "expected payment source" for adult clients of the Community Mental Health Centers for purposes of planning and system analysis. These studies have allowed the Division to make projections of service utilization; estimate the potential costs and benefits associated with various Medicaid coverage configurations; and assess the impact that the Mental Health Medicaid Program has had on the medical assistance status of the CMHC client population.

This brief analysis is based on four studies conducted over the period March of 1999—December 2003.

#### **BACKGROUND**

The introduction of the Community Mental Health Medicaid Program in 1987 marked the beginning of an intense period of growth in the percentage of CMHC clients who are Medicaid eligible. For example, in 1986, only 22% of the CMHCs' adult clients were covered by Medicaid. This figure grew to 34% just three years later in 1989, reached 56% in 1999, and has continued to increase slowly since then. It is clear that much of the long-term change in the payment status profile of the population served by the CMHCs was due to the potential financial gains to be realized by ensuring that all eligible clients applied for and received the benefits to which they are entitled.

The data for this study was gathered by DBH using a survey instrument completed by all CMHCs, based on client payment status as captured by their in-house billing systems. In all cases, the survey data represent a 100% sample of the caseloads of the eight CMHCs at a specific point in time. Note that the caseload data in this study might differ significantly from the normal year-end census, as the data were collected at different times during the year.

#### **RESULTS**

The statewide adult census increased 15% from 1999 to 2002, growing from 9,035 to 10,397, before dropping slightly in 2003 to 9,891 in December of 2003 (Figure 1).

While the 15% growth from 1999—2002 was a result of relatively equally growth in both the CSP and GOP populations, the modest decrease in 2003 was primarily a result of a decrease in the GOP population which dropped from 4,721 to 4,307. This drove the proportion of the entire caseload represented by CSP clients up slightly from 55% to 56% (Figure 2).

While the percentage of the overall CMHC caseload repre-

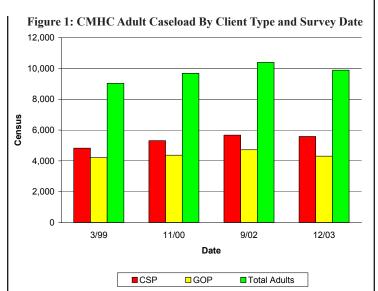


Figure 2: Percentage of Total CMHC Caseload By Client Type and Survey Date

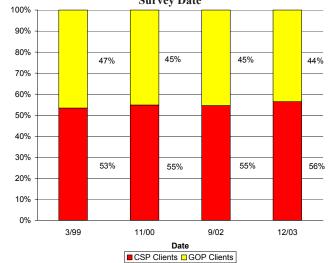
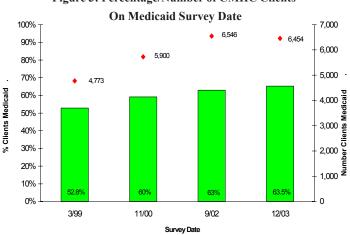


Figure 3: Percentage/Number of CMHC Clients



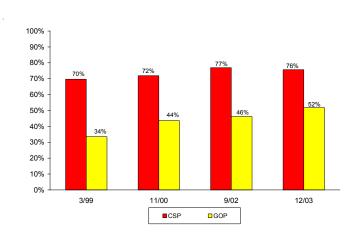
sented by Medicaid clients grew slightly from 63.% to 63.5%, the absolute number of clients receiving Medicaid by survey date decreased slightly from 6,546 to 6,454 (See Figure 3). Although this aggressive pursuit of Medicaid revenue has helped the system to grow, it has reached a point where it is a major driving force in the system, with the Federal portion of Medicaid representing over 35% of overall community revenue.

The percentage of total CSP clients receiving Medicaid fell slightly from 77% in 2002 to 76% in 2003 while the percentage of total GOP clients receiving Medicaid jumped from 46% in 2002 to 52% in 2003.(Figure 4). These figures are in sharp contrast to the 1986 baseline data used for this series of reports in which just 39% of CSP clients and 9% of GOP clients were covered.

While we attribute the growth in the percentage of Medicaid-eligible CSP clients primarily to a better understanding of the eligibility system and increased vigilance on the part of providers, the recent continued growth in the GOP area is likely due in large part to an actual increase in the level of severity of the GOP population.

Figures 5 and 6 show the breakout of the 12/03 census by

Figure 4: Percentage of Total CSP and Total GOP Clients
Receiving Medicaid



client type and funding source. Individual providers may wish to use these figures to assess the composition of their caseload in relation to the state as a whole.

Figure 5: CSP Clients By Payment Source 2003

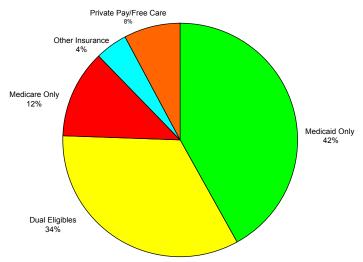
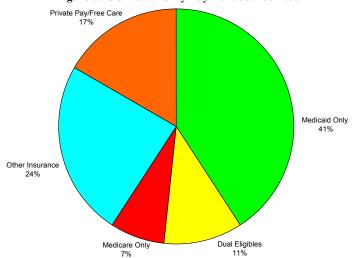


Figure 6: GOP Clients By Payment Source 2003



Additional copies of this report are available on request from:

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